

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 6  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00626119	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> <div style="display: inline-block; border: 1px solid black; padding: 2px;">10 / 21 / 2016</div>	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 09 / 23 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.26
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16		Category/ Type 24E	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 09 / 30 / 2016
Name of Federal Candidate Masto, Catherine Cortez, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 09 / 23 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.25
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16		Category/ Type 24E	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">MM / DD / YYYY</div> 09 / 30 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px;">154000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pulaski, Art, , ,

[Electronically Filed]

Date

MM / DD / YYYY

11 / 07 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 2 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00626119																									
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>10</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>21</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2016</td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M		10			D	D		21			Y	Y	Y	Y	Y	Y	2016					
M	M																										
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2016																											

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>09</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>30</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2016</td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M		09			D	D		30			Y	Y	Y	Y	Y	Y	2016					
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Mailing Address 600 Grand Avenue, Suite 410		Amount <table border="1" style="width:100%"> <tr><td>0.00</td></tr> </table>		0.00																							
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City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.27																								
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16		Category/ Type 24A	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>09</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>30</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2016</td><td></td><td></td><td></td><td></td><td></td></tr> </table>	M	M		09			D	D		30			Y	Y	Y	Y	Y	Y	2016					
M	M																										
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2016																											
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____																								
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"> <tr><td>154000.00</td></tr> </table>	154000.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____																							
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Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>09</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>30</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2016</td><td></td><td></td><td></td><td></td><td></td></tr> </table>		M	M		09			D	D		30			Y	Y	Y	Y	Y	Y	2016					
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2016																											
Mailing Address 600 Grand Avenue, Suite 410		Amount <table border="1" style="width:100%"> <tr><td>0.00</td></tr> </table>		0.00																							
0.00																											
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.28																								
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 9/23/16-9/30/16		Category/ Type 24A	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td>09</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td>30</td><td></td><td></td></tr> </table> <table border="1" style="display:inline-table"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2016</td><td></td><td></td><td></td><td></td><td></td></tr> </table>	M	M		09			D	D		30			Y	Y	Y	Y	Y	Y	2016					
M	M																										
09																											
D	D																										
30																											
Y	Y	Y	Y	Y	Y																						
2016																											
Name of Federal Candidate Heck, Joe, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV																								
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="width:100%"> <tr><td>0.00</td></tr> </table>	0.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____																							
0.00																											

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td>0.00</td></tr> </table>	0.00
0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	<table border="1" style="width:100%"> <tr><td></td></tr> </table>	
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="width:100%"> <tr><td></td></tr> </table>	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Pulaski, Art, , ,

[Electronically Filed]

Date

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07		

Y	Y	Y	Y	Y	Y
2016					

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 3 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00626119	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount 0.00	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.29
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/Type 24A	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		154000.00	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount 0.00	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.30
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/Type 24A	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016
Name of Federal Candidate Heck, Joe, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		0.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Date

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11 / 07 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 4 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00626119	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		MM / DD / YYYY 10 / 21 / 2016	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount 0.00	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.31
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2016
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		154000.00	

Full Name of Payee <b>California Labor Federation, AFL-CIO</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2016	
Mailing Address 600 Grand Avenue, Suite 410		Amount 0.00	
City Oakland	State CA	Zip Code 94565	Transaction ID : EDT.E.32
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/Type 24E	Date of Disbursement or Obligation MM / DD / YYYY 10 / 01 / 2016
Name of Federal Candidate Masto, Catherine Cortez, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		0.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Pulaski, Art, , ,

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 5 OF 6  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Committee for Working Families, sponsored by the California Labor Federation, AFL-CIO</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00626119	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input type="checkbox"/> New report	<input checked="" type="checkbox"/> Amends report filed on
		M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016	

Full Name of Payee United Food and Commercial Workers 8 Golden State Political Action Committee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 2200 Professional Drive		Amount 0.00	
City Roseville	State CA	Zip Code 95661	Transaction ID : EDT.E.33
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/ Type 24A	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016
Name of Federal Candidate Trump, Donald, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		154000.00	

Full Name of Payee United Food and Commercial Workers 8 Golden State Political Action Committee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 2200 Professional Drive		Amount 0.00	
City Roseville	State CA	Zip Code 95661	Transaction ID : EDT.E.34
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/ Type 24A	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016
Name of Federal Candidate Heck, Joe, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		0.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Pulaski, Art, , ,

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Date

M M M / D D D / Y Y Y Y Y Y  
11 / 07 / 2016

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 6 OF 6  
FOR SE OF FORM 24/48

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		M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2016	

Full Name of Payee United Food and Commercial Workers 8 Golden State Political Action Committee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016	
Mailing Address 2200 Professional Drive		Amount 0.00	
City Roseville	State CA	Zip Code 95661	Transaction ID : EDT.E.36
Purpose of Expenditure Lodging and Travel Expenses for Canvassing. 10/1/16-10/19/16		Category/Type 24E	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2016
Name of Federal Candidate Masto, Catherine Cortez, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		0.00	

Full Name of Payee		Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	0.00

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